

MINUTES EMS EDUCATION COMMITTEE

February 14, 2005

Wayne Township Fire Department Headquarters
Indianapolis , Indiana

Members Present: Judy Hallam, Tina Butt, Steve Garrison, Jim Christopher, Lindi Holt, T.N. Petry MD, Ed O'Farrell, Rita Herrington, Hugh Garner, John Zartman, Steve Grammer, Suzan Henke, Ron Parsons, Rod Bosley.

Staff: Tony Pagano, Sam Steinhilber, Michael Garvey

Guests: Myron Mackey, EMS Commission, Doug McKain, Miami Co EMS, James Howard, Wishard Health Services, Chuck Ford, Wishard Health Services, Deanna Hawkins, Wishard Health Services, Mark Mangrum, Wishard Health Services, Dan Chubb, Brownsburg Fire Dept, Donnie Woodyard, Riverview Hospital.

Lindi presented a brief recap of the Advanced Care Paramedic. She recommended the first item that needs to be looked at was terminal competencies. The second item was to develop a skills set that would be the criteria. Lindi asked for volunteers from those present to help with these items. She will chair the committee. We would also like to have folks on the committee from the rural areas of the state. **Hugh Garner and Doug McKane** (Dukes Memorial Hospital, Peru) both agreed to serve on the committee.

Steve Garrison made a presentation concerning the Driving Course along with a handout, "Emergency Vehicle Operations Course – Ambulance. Steve recommended the changes that were noted on the handout. A recommendation was made to include a one-day EVOC driving instructor course at EMS Conference that would address currently certified EVOC personnel. Steve's recommendation will be accepted and taken to the Commission.

Tony explained the status of the Paramedic In-service Guidelines. The new guidelines will take effect at the time of the next rules change. Motion from John Zartman, seconded by Rita Harrington to accept the recommended changes. **Steve Garrison** discussed his concern regarding the National Registry in-service sheets that don't require any signatures. He is concerned about documentation of hours from the Nat'l Registry sheets. According to **Sam**, the state has an extra signature page that should be copied and attached to pages 1, 2, and 3. Motion carried.

Tony referred those in attendance to the handout entitled "Appendix A". Appendix A is job functions that come directly from the curriculum. Everyone is

encouraged to look the document over and bring recommendations back to Tony and the Education Committee. There seems to be some concern as to the appropriateness of giving the state exam in an oral format. **Lindi** suggests the possibility of a form that identifies required technical competencies that must be met before they can take the course. Tony asked for help from the attendees as to what we need to do. **Rita Herrington** also may have a hospital attorney who may be of some help that is involved in a hospital case right now. **Leon Bell** recommended that we check with the “No Child Left Behind” program and identify the minimum level of technical skills required at the 12th grade graduation level. **Jim Christopher** cautioned that we may be lowering the bar too far with the potential of lessening the quality of care to the public.

Mike Garvey presented a legislative update. Couple of bills regarding EMS and Fire that prevents private and public employers from taking action against volunteer firefighters and EMS personnel who arrive late to work due to fire or EMS runs.

A bill addressing a moratorium on committees and commissions within the state has been modified to remove the term moratorium. There will be a review process this summer to look at all committees, boards and commissions. There are currently over 300 working groups in the state at this time.

SB 0056 concerns the revamping of the EMS office. The bill would put SEMA and DFBS under a new Department of Homeland Security. EMS would fall under the Division of Fire and Building Safety.

Donny Woodyard (Riverview Hospital) made a presentation of the King System Airway device. This device has just recently been approved for use in the field in the pre-hospital setting. Contraindications are intact gag reflex, esophageal varices, patient’s less than four foot in height. List price for an EMS kit (tube, tape, syringe, instructions, in a pre-sealed bag) is \$40.00. Three sizes 3, 4, 5 correspond to 4 ft. 5 ft., and 6 ft. Larger sizes could be used on shorter people but smaller sizes could not be used on taller people.

Put in place similar to an oral airway. 100% esophageal insertion in over 1 million uses worldwide. A single inflation in a single port takes care of the inflation on both cuffs. This device only goes in the esophagus.

Deanna Hawkins brought the question to the committee about testing synchronized cardioversion in the National skill station. She is concerned that Indiana testing is still doing synch cardioversion. Nothing has come from National to local evaluators. **Leon** asked that an Indiana EMS official write a letter to National requesting that synchronized cardioversion scenarios not be sent to Indiana. **Tony** will get with **Sam** and draft a letter and send it to the National regarding cardioversion. There will be a request made for a waiver at the next commission meeting for Benadryl, cardioversion, and D25.

Mark Mangrum brought a question to the committee on the HazMat/WMD objectives that there is an error with objective number 15. Problem with the objectives is the difference between the National Fire Academy Objectives and the Office of Domestic Preparedness objectives. **Tony** will address the issue and make the necessary corrections (new list of objectives sent out).

Adjournment. Next meeting April 11, noon. Wayne Township Fire Dept. HQ